

## DECLARATION FOR PATENT APPLICATION

As a below named Inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled  
CELLULAR NETWORK SYSTEM, the specification of which

is attached hereto unless the following box is checked:

was filed on \_\_\_\_\_ as United States Application Number or PCT International Application Number \_\_\_\_\_ and was amended on \_\_\_\_\_ (If applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or PCT International application having a filing date before that of the application on which priority is claimed.

Priority Not Claimed

Prior Foreign Application(s)

(Number) (Country) (Day/Month/Year Filed)

(Number) (Country) (Day/Month/Year Filed)

I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States provisional application(s) listed below.

(Application Number) (Filing Date)

(Application Number) (Filing Date)

I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s), or § 365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. § 112,

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

(Application Number) (Filing Date) (Status -- patented, pending, abandoned)

(Application Number) (Filing Date) (Status -- patented, pending, abandoned)

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Address all telephone calls to ZIAK HADAD at telephone number 011-9723-9528440

Address all correspondence to ZIAK HADAD  
48 HAALMOGIM ST., RISHON LEZION, ISRAEL

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

I declare (or certify, verify or state) under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Full name of sole or first inventor (given name, family name) ZIAK HADAD

Inventor's signature ZIAK HADAD Date DECEMBER 12, 1999

Residence ISRAEL Citizenship ISRAEL

Post Office Address 48 HAALMOGIM ST., RISHON LEZION, ISRAEL

Full name of second joint inventor, if any (given name, family name) X

Second Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_

Residence \_\_\_\_\_ Citizenship \_\_\_\_\_

Post Office Address \_\_\_\_\_

Additional inventors are being named on separately numbered sheets attached hereto.

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Office of Assistance, Quality and Enhancement Division, Patent and Trademark Office, Washington, DC 20531 and to the Office of Information and Regulatory Affairs, Office of Management and Budget (Project 0651-0032), Washington, DC 20503. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20531.